

**NEVADA STATE FIRE MARSHAL  
AUTOMATIC SPRINKLER PLAN SUBMITTAL  
BASED ON NFPA 13/13R 1989 EDITION**

1. Company submitting: \_\_\_\_\_ State Fire Marshal License #: \_\_\_\_\_
2. Project Title: \_\_\_\_\_
3. Project Address: \_\_\_\_\_
4. Water Supply ( check one or more ):
  - 4.1 Municipal System \_\_\_\_\_ flow \_\_\_\_\_ GPM Residual \_\_\_\_\_ psi
  - 4.2 Private District System \_\_\_\_\_ flow \_\_\_\_\_ GPM Residual \_\_\_\_\_ psi
  - 4.3 Gravity Tank \_\_\_\_\_ storage \_\_\_\_\_ gallons flow \_\_\_\_\_ gallons Residual \_\_\_\_\_ psi
  - 4.4 Gravity Tank/Wall \_\_\_\_\_ storage \_\_\_\_\_ gallons flow \_\_\_\_\_ gallons Residual \_\_\_\_\_ psi
  - 4.5 Pressure Tank \_\_\_\_\_ size \_\_\_\_\_ gallons flow \_\_\_\_\_ gallons Residual \_\_\_\_\_ psi
  - 4.6 Other: Explain: \_\_\_\_\_
  - 4.7 Required water supply \_\_\_\_\_ psi @ \_\_\_\_\_ GPM Available water supply \_\_\_\_\_ psi @ \_\_\_\_\_ GPM  
( Note: Available must exceed required by 10 psi)
5. Flow \_\_\_\_\_ Static Pressure \_\_\_\_\_ Residual Pressure \_\_\_\_\_ Test Location \_\_\_\_\_  
Test date \_\_\_\_\_ Test Time: \_\_\_\_\_ (See note no. 2 on back)  
Test By Whom: \_\_\_\_\_ Test By Firm/Agency: \_\_\_\_\_
6. Hazard Classification:

Total area: _____ square feet	Ordinary group 3: _____ square feet
Light hazard area: _____ square feet	Extra hazard group 1: _____ square feet
Ordinary group 1: _____ square feet	Extra hazard group 2: _____ square feet
Ordinary group 2: _____ square feet	High piled storage: _____ square feet
7. Type system coverage:

Area wet: _____ square feet	Area pre-action: _____ square feet
Area dry: _____ square feet	Area deluge: _____ square feet
Area dry pendant: _____ square feet	Area anti-freeze: _____ square feet
8. Quantity of risers:

Light/Ordinary: <u>sum of areas</u> = _____ 52,000 sq ft	
Extra hazard: <u>sum of areas</u> = _____ 40,000 sq ft	Pipe schedule: <u>sum of areas</u> = _____ (extra hazard) 25,000 sq ft
High piled: <u>area</u> = _____ 40,000 sq ft	
9. System is: Pipe schedule: \_\_\_\_\_ Hydraulically calculated: \_\_\_\_\_
10. Sprinkler area coverage per head is:

Light hazard area _____ square feet
Ordinary hazard area _____ square feet
Extra hazard area _____ square feet
11. Side wall sprinkler coverage per head is: \_\_\_\_\_ square feet
12. Piping materials are: Welded or seamless \_\_\_\_\_ Copper pipe \_\_\_\_\_  
Steel pipe \_\_\_\_\_ Plastic pipe \_\_\_\_\_
13. Number of sprinkler heads:  
Total quantity: \_\_\_\_\_ Quantity of spare sprinkler heads: \_\_\_\_\_

14. System has:
- a. Anti-freeze system: \_\_\_\_\_ yes \_\_\_\_\_ no    less than 40 gallons \_\_\_\_\_ yes \_\_\_\_\_ no
  - b. Pre-action system: \_\_\_\_\_ yes \_\_\_\_\_ no    less than 1,000 sprinklers \_\_\_\_\_ yes \_\_\_\_\_ no
  - c. Deluge system: \_\_\_\_\_ yes \_\_\_\_\_ no
  - d. Dry system (see note no. 1) \_\_\_\_\_ yes \_\_\_\_\_ no    non-grid: \_\_\_\_\_ volume: \_\_\_\_\_
  - e. High-piled storage: NFPA 231 \_\_\_\_\_ 231C \_\_\_\_\_ 231D \_\_\_\_\_ 231F \_\_\_\_\_
  - f. Combination standpipe sprinkler system \_\_\_\_\_ yes \_\_\_\_\_ no
15. Cross connection control (backflow protection for potable water systems)
- Type: \_\_\_\_\_ Mfg. \_\_\_\_\_ Model: \_\_\_\_\_
- Listed/approved by: \_\_\_\_\_ Location: \_\_\_\_\_
- Installed by: \_\_\_\_\_ Health approval: \_\_\_\_\_
- (firm) (name and office)
16. Pipe schedule classification:
- |                  |                         |                  |
|------------------|-------------------------|------------------|
| Light _____      | residual pressure _____ | riser flow _____ |
| Ordinary 1 _____ | residual pressure _____ | riser flow _____ |
| Ordinary 2 _____ | residual pressure _____ | riser flow _____ |
| SEE ** _____     | residual pressure _____ | riser flow _____ |
- \*\* Design for special systems, Ordinary 3, High-piled, High-rise, and Extra Hazards (see table 2-2.1.1(a)).
17. Hydraulic calculated system:
- Area of sprinkler operation \_\_\_\_\_ square feet
- Density - gpm/square foot \_\_\_\_\_
- Hose allowance \_\_\_\_\_
- Static head loss \_\_\_\_\_
18. A complete and accurate submittal must include the following:
- a. Riser diagram with all trim.
  - b. Fire department connection detail.
  - c. Material specifications for all materials including listing and/or approval.
  - d. Piping elevations.
  - e. Calculations.
  - f. The sprinkler system shall include underground piping drawings and specifications.
  - g. Full height cross section of the building.
  - h. Occupancy of each area of room.
  - i. Graph sheet.
  - j. Cross connection control (backflow prevention) detail. See note no. 8.

#### NOTES:

1. NFPA 13 indicates in Section 5-2.3.1 that a gridded dry pipe system shall not be installed (1989 Edition).
2. Current water supply information shall be provided and tested during the peak hours. Water supply information must have been taken from tests within 90 days.
3. Need sway brace and earthquake coupling location.
4. R-1 occupancies (hotel, motel, apartments, condominiums) must have residential or quick response standard sprinkler heads. UNIFORM BUILDING CODE 3802 (h).
5. Certificate of Registration holder must be on the job site at all times when work is being performed.
6. When job is completed it must be approved, a tag hung, and a letter certifying that it meets code and NAC 477 submitted to the authority having jurisdiction.
7. Additional and/or relocated sprinkler heads (10 or less) do not need to be submitted to this office.
8. Approval of plan contingent on acceptable cross connection control (backflow prevention) valving to protect the drinking water supply. (Check with health authorities).
9. Above ground/underground test certificates must be supplied to this office.
10. An R-1 occupancy that has more than two stories must have an NFPA 13 system installed. An R-1 occupancy that has two stories or less must have an NFPA 13-R or NFPA 13 system installed.

SUBMITTED BY: \_\_\_\_\_ (SIGNATURE REQUIRED TO INITIATE REVIEW. UNSIGNED SUBMITTALS WILL BE RETURNED)

REPRESENTING: \_\_\_\_\_